

JCO6 Rec'd PCT/PTO 12 OCT 2005

WEMMH/SB/21 (4/03)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/549.709
		Filing Date	September 16, 2005
		First Named Inventor	Martin TWELFTREE
		Group Art Unit	
		Examiner Name	Not Yet Assigned
Total Number of Pages in this Submission	8	Attorney Docket Number	8328-4

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached see PTO-2038 form <input type="checkbox"/> Amendment Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure (please identify below) <input checked="" type="checkbox"/> Return Receipt Postcard Transmittal of Declaration of Inventors; Declaration & Power of Attorney
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	James M. Durlacher Woodard, Emhardt, Moriarty, McNett & Henry LLP
Signature	<i>James M. Durlacher</i>
Date	October 12, 2005

Certificate of Mailing			
I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR §1.10 on the date indicated above and is addressed to Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
on this date: October 12, 2005			
Typed or printed name	Sandra L. Stilz		
Signature	<i>Sandra L. Stilz</i>	Date	October 12, 2005

FEE TRANSMITTAL FOR FY 2005

Effective 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act (H.R. 4818).

☐ Applicant claims small entity status. See 37 CFR 1.27Total Amount of Payment (\$)**130.00****Complete if Known**

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METHOD OF PAYMENT (check all that apply)
☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None ☐ Other (please identify):

☐ Deposit Account: Deposit Account Number **23-3030** Deposit Account Name **Woodard, Emhardt, Moriarty, McNett & Henry LLP**
See PTO 2038 Form

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments ☒ Charge any additional fee(s) during the pendency of this application, excluding the payment of issue fees
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION:****1. BASIC FILING, SEARCH AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	\$ 0
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee	Fee Paid (\$)
* - 20 or HP = *	x 50	= (\$)	0			
(HP = highest number of total claims paid for, if greater than 20)						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
* - 3 or HP = *	x 200	= (\$)	0	360		\$ 0
(HP = highest number of independent claims paid for, if greater than 3)						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 =	/ 50	= (round up to a whole number) x		0
				Fee Paid (\$)
				0

4. OTHER FEE(S)

Non-English Specification.

Other: **Fee for late filing of Oath or Declaration** **130.00****SUBMITTED BY:**

Name (Print/Type):	James M. Durlacher	Registration No.: (Attorney/Agent)	28,840	Telephone:	(317) 634-3456
Signature:	<i>James M. Durlacher</i>			Date:	

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office, on October 12, 2005

Name (Print/Type)	Sandra L. Stilz	Date	October 12, 2005
Signature	<i>Sandra L. Stilz</i>		

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:)	Before the Examiner
)	
Martin TWELFTREE)	Not Yet Assigned
)	
Serial No. 10/549,709)	Group Art Unit ____
)	
Filed September 16, 2005)	
)	
IGNITION SYSTEM FOR A SMOKING)	
MACHINE)	October 12, 2005

TRANSMITTAL OF DECLARATION OF INVENTORS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Box PCT

Sir:

On September 16, 2005, the above-identified patent application was filed by Express Mail (Receipt No. EV579027757US-see copy of returned postcard attached) with an unsigned Declaration. Applicants transmit herewith a fully executed Declaration, along with the large entity surcharge therefore of \$130.00 (37 CFR 1.492(e)) which is to be charged to a credit card. The credit card authorization is enclosed.

10/17/2005 ATRAN1 00000147 10549709

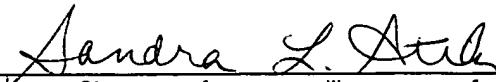
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Signature of person mailing paper or fee

No additional fees are believed to be due, but if any additional fees are deemed required, please charge such fees to Deposit Account No. 23-3030.

Respectfully submitted

By: James M. Durlacher
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8328-4:JMD:#367725:ss

Matter No./Case No. 8328-4 10/549709 8.55 9/16/05

RECEIPT OF THE ATTACHED IS HEREBY ACKNOWLEDGED

☒ Patent ☐ Trademark ☐ Copyright ☒ Application Spec. # _____ of pages
☒ PTO Form 2038 (\$ 1100 Fee)
Serial No. _____ ☒ # 10 sheets of drawings FORMAL
☒ Declaration & Power of Attorney unsignd
Applicant Martin TWELF TREE ☐ Assignment & Recordation cover sheet
Ignition System ☒ IDS w/# 2 enclosed references
For A Smoking Machine ☒ Transmittal Form/PTO Form 1390
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EV57902775J003 Rec'd PCT/PTO 16 SEP 2005